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Complete if Known Substitute for form 1449/PTO 10/589,024-Conf. #4142 **Application Number** INFORMATION DISCLOSURE August 10, 2006 Filing Date Shinichi NISHIDA STATEMENT BY APPLICANT First Named Inventor N/A Art Unit (Use as many sheets as necessary) Not Yet Assigned Examiner Name 1248-0891PUS1 of 1 Attorney Docket Number

			U.S. PA	TENT DOCUMENTS	
Examiner Initials*	Cite No.1	Document Number	Publication Date	Name of Patentee or	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code <sup>2</sup> ( if known)	MM-DD-YYYY	Applicant of Cited Document	
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